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**CONFIRMATION NO. 9137**

<b>SERIAL NUMBER</b> 10/786,167	<b>FILING OR 371(c) DATE</b> 02/26/2004  <b>RULE</b>	<b>CLASS</b> 280	<b>GROUP ART UNIT</b> 3616	<b>ATTORNEY DOCKET NO.</b> 076326-0273	
<b>APPLICANTS</b> Thomas Herrmann, Illerkirchberg, GERMANY;					
<b>** CONTINUING DATA *****</b> <div style="text-align: center; font-size: 1.2em;">None</div>					
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 103 09 696.5 02/26/2003 <div style="text-align: center; font-size: 1.2em;">Yes</div>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/17/2004</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i> Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 22428					
<b>TITLE</b> Belt height adjustment device					
<b>FILING FEE RECEIVED</b> 954	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		